

Provider Inspection Summary

For the period 06/01/2003 to 05/31/2006
Community Based Residential Facility
CLASS CNA (NONAMBULATORY)

STATE OF WISCONSIN
Bureau of Quality Assurance
P.O. Box 2969
Madison WI 53701-2969

Facility Information

Facility Name: MARIANNES ELDER HOUSE INC (110170)

Address: 6229 RENEE CT, MCFARLAND, WI 53558

License Status: REGULAR

Licensed/Certified/Registered 07/31/1995

Regional Office: SOUTHERN REGION (MADISON), (608) 243-2370

Survey History

Survey ID: 0092910 **End Date:** 06/21/2004 **Type:** ABBREVIATED **Purpose:** SURVEY

Results: ENFORCEMENT ACTION

Statement of Deficiency: #10008020 Served 06/15/2004

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
83.14(1)(c)	UNIVERSAL PRECAUTIONS		
83.14(1)(d)	FIRE SAFETY, FIRST AID & CHOKING		
83.33(3)(b)2.d	MEDICATION STORAGE SHALL BE LOCKED		
83.33(3)(c)1	CONTROLLED SUBSTANCES		
83.33(3)(c)3	PROOF-OF-USE RECORD AUDITED DAILY		

Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.

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Enforcement History

Date: 07/09/2004 **SOD #**10008020 **Appealed:** No

Sanctions

FORFEITURE---83.14(1)(c)

FORFEITURE---83.14(1)(d)

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